CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMICUNTERESTS FAIR POLITICAL PROVEREPAGEIMISSION



Date Received Official Use Only

Please type or print in ink.

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NAN	E OF FILER (LAST)		(FIRST)	(MIDDLE)		
Sc	hoeffel	J.		Scott		
1.	Office, Agency, or Court					
	Agency Name					
	City of Dana Point					
	Division, Board, Department, District, if applicable		Your Position			
			City Council			
	\blacktriangleright If filing for multiple positions, list below or on an attachment.					
	Agency: See attached		Position:			
2.	Jurisdiction of Office (Check at least one box)		-			
	☐ State		☐ Judge or Court Com	missioner (Statewide Jurisdiction)		
	Multi-County		County of			
	☑ City of Dana Point	•	Other	· · · · · · · · · · · · · · · · · · ·		
3.	Type of Statement (Check at least one box)					
	Annual: The period covered is January 1, 2012, through December 31, 2012.		Leaving Office: Da (Check one)	te Left/		
	The period covered is//	., through	 The period cover leaving office. 	red is January 1, 2012, through the date of		
	Assuming Office: Date assumed		The period cover the date of leaver	red is, through ng office.		
	Candidate: Election year and office sought, if different than Part 1:					
- -	Schedule Summary					
	Check applicable schedules or "None."	➤ Total n	umber of pages inclu	ding this cover page:		
	Schedule A-1 - Investments – schedule attached	I 71	Schedule C - Income, Los	ans, & Business Positions – schedule attached		
	Schedule A-2 - Investments – schedule attached	$\overline{\mathbf{Z}}$				
	✓ Schedule B - Real Property – schedule attached		Schedule E - Income - G	ifts - Travel Payments - schedule attached		
		-				
	☐ None - No repo	rtable interests	on any schedule			
5	Verification					

I certify under penalty of perjury under the laws of the State

Date Signed March 27, 2013

J. Scott Schoeffel Agency	Position	Type of Statement	
Foothill Eastern Transportation Corridor Agency	Alternate Board Member	Annual Statement	
Transportation Corridor System	Alternate Board Member	Annual Statement	
San Joaquin Transportation Corridor Agency	Board Member	Annual Statement	
Coastal Animal Services Authority (CASA)	Board Member	Annual Statement	

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SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
	•

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
AT&T, Inc.	Exxon Mobil Corp Com
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Communications	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 \[\sqrt{10,001} - \$100,000 \cdot \]
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	✓ Stock ☐ Other(Describe)
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED .	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
JB Morgan Chase & Co.	Verizon Communications Com
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Banking	Communiccattions
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
✓ Stock ☐ Other	
(Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u> </u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S \$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe) Partnership O Income Received of \$0 - \$499	(Describe) Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 12 / / 12	/ / 12 / / 12
ACQUIRED DISPOSED	ACQUIRED DISPOSED
	11
Comments:	

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
•

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► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 24361 Taxco Drive	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS			
CITY Dana Point	CITY			
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 10,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000 Over	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000			
NATURE OF INTEREST	NATURE OF INTEREST			
✓ Ownership/Deed of Trust	Ownership/Deed of Trust Easement			
Leasehold Cher	Leasehold Other			
,				
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED \$0 - \$499			
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000				
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000			
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None .	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. None			
* \/	anding institutions and in the lands to an enter a section of			
	ending institutions made in the lender's regular course of without regard to your official status. Personal loans and ness must be disclosed as follows:			
NAME OF LENDER*	NAME OF LENDER*			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER			
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)			
% None	%			
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD			
\$500 - \$1,000	\$500 - \$1,000 \$1,001 - \$10,000			
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000			
Guarantor, if applicable	Guarantor, if applicable			
Comments:				

SCHEDULE C Income, Loans, & Business **Positions** (Other than Gifts and Travel Payments)

Name	CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	
	Name	

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Integrated Healthcare Holdings, Inc.	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1301 North Tustin Avenue, Santa Ana, CA	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Hospital System	·
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
General Counsel/Exec. Vice President	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000
☐ \$10,001 - \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
✓ Salary	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of(Real property, car, boat, etc.)	Sale of(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other (Describe)	Other(Describe)
► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING	PERIOD
retail installment or credit card transaction, made in	ial lending institutions, or any indebtedness created as part of a the lender's regular course of business on terms available to al status. Personal loans and loans received not in a lender's llows:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	%
ADDRESS (Business Address Acceptable)	
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	City
\$1,001 - \$10,000	
\$10,001 - \$100,000	Guarantor
OVER \$100,000	Other
_	Other(Describe)
	·
Comments:	

SCHEDULE D Income - Gifts

CALIFORNIA FORM	
Name	

NAME OF SOURCE (Not an Acronym) Southern CA Edisjon ADDRESS (Business Address Acceptable) P.O. Box 800, Rosemead, CA 91770 Business Activity. If ANY, OF SOURCE Utility Company DATE (immiddlyy) VALUE DESCRIPTION OF GIFT(S) 05 _ 12 _ 12 _ 2 _ 250.00 Charity Dinner					<u> </u>
ADDRESS (Business Address Acceptable) P.O. BOX 800, Rosemead, CA 91770 Business Activity, IF ANY, OF SOURCE Utility Company DATE (mmiddlyy) VALUE DESCRIPTION OF GIFT(S) 05 _12 _122250.00	· · · · · · · · · · · · · · · · · · ·		► NAME OF SOURCE	(Not an Acronym)
BUSINESS ACTIVITY, IF ANY, OF SOURCE Utility Company DATE (mmiddlyg) VALUE DESCRIPTION OF GIFT(S) 05 _ 12 _ 12 _ 250.00	ADDRESS (Business Address Acceptable)	0	ADDRESS (Business Address Acceptable)		
Utility Company DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 05	- <u></u>	<u> </u>	DUSINGS ACTIVIT	V IE ANN OF CO	uper
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 05 , 12 , 12	•		BOSINESS ACTIVIT	1, IF AN1, OF 50	urce .
05 , 12 , 12 s 250.00 Charity Dinner		DTION OF CITTO	DATE ((ddb-)	\/A1.11E	DESCRIPTION OF CITTICS
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ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) J J \$	\$			\$	
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DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	ADDRESS (Business Address Acceptable)	, , ,	ADDRESS (Busines	s Address Accepta	able)
	BUSINESS ACTIVITY, IF ANY, OF SOURCE		BUSINESS ACTIVIT	Y, IF ANY, OF SO	URCE
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	\$			\$	
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ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	\$			\$ <u></u>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) J J \$	► NAME OF SOURCE (Not an Acronym)		► NAME OF SOURCE	(Not an Acronym	,
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) // \$	ADDRESS (Business Address Acceptable)		ADDRESS (Busines	s Address Accepte	able)
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